

FORMATION: J SAND Status: PRODUCING

Treatment Date: 09/13/2011 Date of First Production this formation: 01/24/2012

Perforations Top: 8018 Bottom: 8044 No. Holes: 52 Hole size: 0.38

Provide a brief summary of the formation treatment: _____ Open Hole:

J S PERF 8018-8044 HOLES 52 SIZE 0.38
Frac J-Sand down 4-1/2" Csg w/ 147,378 gal Slickwater w/ 115,000# 40/70, 4,000# SB Excel

This formation is commingled with another formation: Yes No

Test Information:

Date: _____ Hours: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____

Calculated 24 hour rate: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ BTU Gas: _____ API Gravity Oil: _____

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____

Bridge Plug Depth: _____ Sacks cement on top: _____

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 09/24/2011 Date of First Production this formation: 01/24/2012

Perforations Top: 7306 Bottom: 7560 No. Holes: 112 Hole size: 0.42

Provide a brief summary of the formation treatment: _____ Open Hole:

NB PERF 7306-7394 HOLES 58 SIZE 0.42 CD PERF 7542-7560 HOLES 54 SIZE 0.42
Frac Niobrara B & C down 4-1/2" Csg w/ 250 gal 15% HCl & 243,638 gal Slickwater w/ 200,300# 40/70, 4,000# SuperLC
Frac Codell down 4-1/2" Csg w/ 200,880 gal Slickwater w/ 150,780# 40/70, 4,000# SuperLC

This formation is commingled with another formation: Yes No

Test Information:

Date: _____ Hours: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____

Calculated 24 hour rate: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ BTU Gas: _____ API Gravity Oil: _____

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____

Bridge Plug Depth: _____ Sacks cement on top: _____

Comment: _____

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: Cindy Vue

Title: Regulatory Analyst II Date: 2/10/2012 Cindy.Vue@anadarko.com

Email
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Attachment Check List

Att Doc Num	Name
400251109	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)